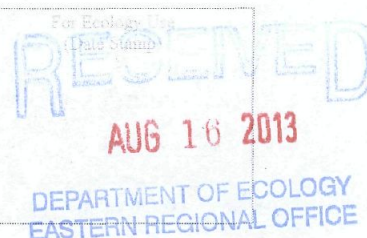




## Application for Change/Transfer of Water Right



For filing with the Department of Ecology or with County Conservancy Boards

**A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION IF FILED WITH THE DEPARTMENT OF ECOLOGY**

(Check all that apply.)

- ☐ Change purpose(s) of use
- ☐ Add purpose(s) of use
- ☐ Change point(s) of diversion/withdrawal
- ☒ Add point(s) of diversion/withdrawal
- ☐ Change/transfer place of use
- ☒ Other (i.e. consolidation, intertie, trust water)

Explain: Split A + B

**\*\*IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)\*\***

### FOR OFFICIAL USE ONLY

DATE APPLICATION RECEIVED 8-16-13  
CHECK NO. 1021 FEE \$ 50.00  
DATE ACCEPTED 8-19-2013 BY KRUF  
CHANGE NO. CG3-080338  
COUNTY Grant WRIA 41  
SPECIAL AREA OGWMS  
SEPA: ☒ EXEMPT ☐ NOT EXEMPT  
ECY CODING: 001-002-WR10285-000011  
APP NO. \_\_\_\_\_ PERMIT NO. \_\_\_\_\_  
CERT NO. \_\_\_\_\_ CERT OF CHG NO. \_\_\_\_\_

☒ I have participated in a pre-application conference with Ecology.

### 1. Applicant Information

A. APPLICANT/BUSINESS NAME <u>Dale A. + Margaret Durbin Estate</u>		PHONE NO.	FAX NO.
ADDRESS <u>940 Stone Road</u>			
CITY <u>Moses Lake</u>	STATE <u>WA</u>	ZIP CODE <u>98837</u>	
EMAIL ADDRESS (IF AVAILABLE)			

B. CONTACT (IF DIFFERENT FROM ABOVE) <u>Daniel Ray + Hermie M. Durbin</u>		PHONE NO. <u>509-750-1386</u>	FAX NO.
ADDRESS <u>9518 Stone RD NE</u>			
CITY <u>Moses Lake</u>	STATE <u>WA</u>	ZIP CODE <u>98837</u>	
EMAIL ADDRESS (IF AVAILABLE)			

LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE <u>See above</u>	PHONE NO.	FAX NO.
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE)		

### 2. Water Right Information

WATER RIGHT OR CLAIM NUMBER <u>OB-338</u>	RECORDED NAME(S) <u>Dale A + Margaret Durbin</u>
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS: _____	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.



### 3. Point(s) of Diversion/Withdrawal:

#### A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
A Well	1	NW	NE	10	19	28	170309000	BHP 726

#### B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
B Well	2	NW	NE	10	19	28	170478043	BHP 727

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: ☒ YES ☐ NO PROPOSED: ☒ YES ☐ NO - IF NO, PROVIDE OWNER(S) NAME: \_\_\_\_\_

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

### 4. Purpose of Use:

#### A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
IR	25	17.5	March 1 - Oct. 31 each year

59gpm/AC  
3.5AF/AC

#### B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
IR	20.5	1410.5	same
A	5		
B	5.10	3.51	

### 5. Place of Use:

#### A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:  
5 Acres within the S½ SW¼ & NW¼ of Sec-10, T. 19N., R. 28E., W.M.

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
NW	NE	10	19	28	Grant		5

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? ☒ YES ☐ NO

IF NO, PROVIDE OWNER(S) NAME: \_\_\_\_\_

#### B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:  
A - 1/3 AC parcel 170309000  
B - 1/2 AC parcel 170478043

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
NW	NE	10	19	28	Grant	170309000 + 170478043	5.5

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? ☒ YES ☐ NO

IF NO, PROVIDE OWNER(S) NAME: \_\_\_\_\_

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?

☐ ES ☒ NO - IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): \_\_\_\_\_



## 6. Remarks and Other Relevant Information:

Split permit into two parts A+B.
-Add well to part B.
IF FOR SEASONAL OR TEMPORARY, START DATE ____/____/____ END DATE ____/____/____

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request. For further information, contact: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477. Phone (360) 570-3265.

## 7. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I hereby grant staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in preparing this above application, I understand that all responsibility for the accuracy of the information rests with me.

Applicant Printed Name - Title

Applicant Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
(Date)

Water Right Holder Printed Name

Water Right Holder Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
(Date)

Land Owner of Existing Place of Use Printed Name

Land Owner of Existing Place of Use Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
(Date)

Land Owner of Proposed Place of Use Printed Name

Land Owner of Proposed Place of Use Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
(Date)

Please check the region in which the project is located:

<b>*Submit your application to:</b>  DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611	<input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	<input checked="" type="checkbox"/> Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1295 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 - 160 <sup>th</sup> Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

## WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

- |                                                         |                                                         |
|---------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> APPLICATION FEE NOT ENCLOSED   | <input type="checkbox"/> MAP NOT INCLUDED or INCOMPLETE |
| <input type="checkbox"/> ADDITIONAL SIGNATURES REQUIRED | <input type="checkbox"/> SECTION _____ IS INCOMPLETE    |
| <input type="checkbox"/> OTHER/EXPLANATION: _____       |                                                         |

STAFF: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

**ATTACHMENT FOR  
Application for Change/Transfer of Water Right**

**Point(s) of Diversion/Withdrawal - ☐ Existing ☐ Proposed:**

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #

DO YOU OWN THE ABOVE POINT(S) OF DIVERSION/WITHDRAWAL? ☐ YES ☐ NO

IF NO, PROVIDE OWNER(S) NAME: \_\_\_\_\_

**Purpose(s) of Use - ☐ Existing ☐ Proposed:**

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE

**Place of Use - ☐ Existing ☐ Proposed:**

LEGAL DESCRIPTION OF LANDS							

1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN ABOVE PLACE OF USE? ☐ YES ☐ NO

IF NO, PROVIDE OWNER(S) NAME: \_\_\_\_\_



ATTACHMENT FOR  
Application for Change/Transfer of Water Right

**Signatures:**

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I hereby grant staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

Dale A. Margaret Durbin by Daniel R. Durbin <sup>PR</sup> 8/16/13  
☒ Applicant Printed Name - Title      Applicant Signature  
☒ Water Right Holder Printed Name      Water Right Holder Signature  
☒ Land Owner of Existing Place of Use Printed Name      Land Owner of Existing Place of Use Signature  
Land Owner of Proposed Place of Use Printed Name      Land Owner of Proposed Place of Use Signature  
(Date)

Daniel R. Durbin Daniel R. Durbin 8/16/13  
☒ Applicant Printed Name - Title      Applicant Signature  
☐ Water Right Holder Printed Name      Water Right Holder Signature  
☐ Land Owner of Existing Place of Use Printed Name      Land Owner of Existing Place of Use Signature  
☒ Land Owner of Proposed Place of Use Printed Name      Land Owner of Proposed Place of Use Signature  
(Date)

Hermie M. Durbin Hermie M. Durbin 8/16/13  
☒ Applicant Printed Name - Title      Applicant Signature  
☐ Water Right Holder Printed Name      Water Right Holder Signature  
☐ Land Owner of Existing Place of Use Printed Name      Land Owner of Existing Place of Use Signature  
☒ Land Owner of Proposed Place of Use Printed Name      Land Owner of Proposed Place of Use Signature  
(Date)

\_\_\_\_\_  
☐ Applicant Printed Name - Title      Applicant Signature  
☐ Water Right Holder Printed Name      Water Right Holder Signature  
☐ Land Owner of Existing Place of Use Printed Name      Land Owner of Existing Place of Use Signature  
☐ Land Owner of Proposed Place of Use Printed Name      Land Owner of Proposed Place of Use Signature  
(Date)

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(Date)

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(Date)

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(Date)